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# Going beyond information management: using the *Comprehensive Accreditation Manual for Hospitals* to promote knowledge-based information services

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In 1987, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) initiated the Agenda for Change, a major revision in the evaluation process for hospitals. An essential component of that change was to shift the emphasis away from standards for individual departments to standards for hospital-wide functions. In recent years, hospital librarians have focused their energy and attention on complying with the standards for the "Management of Information" chapter, specifically the IM.9 section on knowledge-based information. However, the JCAHO has listed the health sciences librarian and library services as having responsibilities in six other chapters within the *Comprehensive Accreditation Manual for Hospitals*. These chapters can have a major impact on the services of the hospital library for two reasons: (1) they are being read by hospital leaders and other professionals in the organization, and (2) they articulate specific ways to apply knowledge-based information services to the major functions within the hospital. These chapters are "Education"; "Improving Organizational Performance"; "Leadership"; "Management of Human Resources"; "Management of the Environment of Care"; and "Surveillance, Prevention, and Control of Infection." The standards that these chapters promote present specific opportunities for hospital librarians to apply knowledge-based information resources and service to hospital-wide functions. This article reviews these chapters and discusses the standards that relate to knowledge-based information.

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## INTRODUCTION

In 1987, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) initiated a major revision in the evaluation process for hospitals. An essential component of that change was to shift the emphasis away from standards for individual departments to standards for hospital-wide functions. These hospital-wide functions included educating patients and their families, managing human resources, improving organizational performance, caring for the patient, and managing information. The JCAHO fostered the belief that health care is an organizational effort, requiring many different departments and professionals to work together to provide quality patient care.

The immediate consequence for libraries serving hospitals was the elimination of the Professional Library Services chapter from the *Accreditation Manual for Hospitals* [1]. Beginning in 1994, the standards for li-

brary services were incorporated into the new functional chapter "Management of Information" in the *Comprehensive Accreditation Manual for Hospitals* [2, 3]. The JCAHO used the new functional chapter to bring together all types of information—patient specific, aggregate, knowledge-based, and comparative—and to articulate a vision for effectively and continuously improving information management in health care organizations.

Information is viewed by the JCAHO as an organizational resource, much like staffing and budgets, that needs to be properly managed by every department. This is well documented in a chart entitled "Applicability of the Standards to Specific Individuals and Departments," which outlines individual and departmental responsibilities for each function. Information management is designated as everyone's responsibility [4].

In the "Management of Information" chapter, hospital libraries are generally seen as having responsibil-

ity for section IM.9, which addresses knowledge-based information. Knowledge-based information is defined by the JCAHO as "a collection of stored facts, models, and information that can be used for designing and redesigning processes and for problem solving. Knowledge-based information is found in the clinical, scientific and management literature" [5]. However, the JCAHO must also see librarians and libraries as playing a more active role in the broader hospital-wide function of information management, as evidenced by the inclusion of the resource center or library director in the Information Management Survey interview.

In reviewing the literature on libraries and the joint commission [6–10], most of the discussion focuses on how libraries can comply with the IM.9 standards within the "Management of Information" chapter. These articles focus on the key issues of IM.9, such as the availability of services, a needs assessment, and authoritative resources. Doyle [11], on the other hand, while not identifying any other specific chapters within the *Comprehensive Accreditation Manual for Hospitals*, does suggest ways for librarians to promote knowledge-based information services beyond the specific issues of section IM.9. In particular, she suggests that knowledge-based information may be used in support of the organization's continuous improvement effort and to teach other hospital personnel information management skills. In order for the librarian to become a true health professional, Doyle states that the librarian should contribute to the organization as a staff member, which may involve activities outside of the library.

The JCAHO has suggested an expanded role for librarians and knowledge-based information services by designating six other chapters that are applicable to either the health sciences librarian or library services. What makes these chapters so significant for hospital librarians is that they are *read by other professionals in the hospital*, and they articulate specific ways to *apply* knowledge-based information services to the major functions within the hospital. While IM.9 is important in establishing the basic need to provide knowledge-based resources and services, these other chapters outline concrete ways to use knowledge-based information. The remainder of this article will review the pertinent chapters that offer opportunities to librarians and identify specific standards that may require knowledge-based information services (Table 1).

## EDUCATION (PF)

The chapter focuses on improvement of patient health outcomes through promotion of healthy behavior and involvement of the patient in care decisions. By setting aside an entire chapter devoted to this multidisciplinary function within the hospital, the JCAHO's priority for patient education is apparent. Managed care and the

**Table 1**

Other JCAHO standards relevant to knowledge-based information services

### EDUCATION (PF)\*

- PF.1.7 Patients are informed about access to additional resources in the community.
- PF.4 The hospital plans, supports, and coordinates activities and resources for patient and family education.
- PF.4.1 The hospital identifies and provides the educational resources required to achieve its educational objectives.

### IMPROVING ORGANIZATIONAL PERFORMANCE (PI)

- PI.1.1 These activities are collaborative and interdisciplinary.
- PI.2 New processes are well designed.
- PI.4.3 The hospital compares performance data about its process with information from up-to-date sources.

### LEADERSHIP (LD)

- LD.1.9.1 The leaders implement programs to promote staff members' job-related advancement and educational goals.
- LD.2+ Each hospital department has effective leadership.
- LD.4.1 The leaders understand the approaches to and methods of performance improvement.

### MANAGEMENT OF THE ENVIRONMENT OF CARE (EC)

### MANAGEMENT OF HUMAN RESOURCES (HR)

- HR.4.2 Ongoing in-service and other education and training maintain and improve staff competence.

### SURVEILLANCE, PREVENTION, AND CONTROL OF INFECTION (IC)

\* Alphabetic and alphanumeric codes designate the chapter organization of the *Comprehensive Accreditation Manual for Hospitals*.

trend towards reducing hospital stays means that patients need better access to information. They need information about the hospital before they arrive; about diagnosis, treatment, and prognosis while they are in the hospital; and about community resources and care after they are discharged. While many hospital libraries are already engaged in activities to support patient education, there are several standards within this chapter that focus on issues related to information and resources that the library can help address.

PF.1.7 requires that patients be informed about access to additional resources in the community. Librarians can use this standard to become involved in community or hospital-based information and referral services. Libraries can bring to local coalitions their specialized resources, training, and experience in organizing databases and resources for patients and their families.

PF.4 requires hospitals to plan and coordinate activities and resources to educate patients and their families. Part of this plan calls for information and education to be provided at levels and formats that can easily be comprehended by patients and their families. In addition to identifying educational materials, librarians can be involved in programs that address the issue of appropriate reading levels and language. One such project may be assisting with readability assessments for patient education materials, to ensure that material can be comprehended by an appropriate-community reading level.

PF4.1 states that the hospital should identify and provide the educational resources required to achieve its educational objectives. Clearly, this standard could be used in supporting the development or enhancement of patient education collections, providing appropriate databases such as Health Reference Center, and working with staff to provide access to other resources for educating patients and their families.

It is important to note that the JCAHO does *not* assign the responsibility of educating patients and their families to any one specific department or profession. The overview of the chapter states the JCAHO's position. "While the standards in this chapter recommend a systematic approach to education, they do not require any specific structure, such as an education department, a patient education committee, or the employment of an educator" [12].

### IMPROVING ORGANIZATIONAL PERFORMANCE (PI)

The goal of this chapter focuses on the continuous improvement of patient health outcomes. By way of illustrating the practical application of these standards to health care, the JCAHO uses the preface of each chapter to follow the scenario of a little girl hospitalized after a serious automobile accident. Here, the respiratory department works with the child and compares her therapy response to results reported in the research literature. The child's individual response that is reported in the medical record (patient specific data), the research literature (knowledge-based information), and an internal database of similar cases (aggregate data) are then compared to identify opportunities for improving patient care.

This chapter calls for a planned and systematic approach to process design and performance measurement, assessment, and improvement. Most hospitals have adopted a formalized plan for identifying and improving processes within the hospital. At Rowan Regional Medical Center, the process is called the PDCA cycle—Plan-Do-Check-Act. At Duke University Medical Center, it is called FADE—Focus, Analyze, Develop, and Execute.

PI.1.1 implies that these process-improvement activities are collaborative and interdisciplinary. As staff members of the hospital, librarians may have the opportunity to participate on process improvement teams, while simultaneously demonstrating the value of knowledge-based information services.

PI.2 is a standard with enormous impact for the library and focuses on good process design. The JCAHO explains that good process design should be clinically sound and up-to-date, meaning that *the current literature should be reviewed before developing the new process*. The JCAHO outlines four questions that should be addressed when designing a new process, service, or function:

1. Is it consistent with the mission of the hospital?
2. What do you and your customers expect from it?
3. What do the *scientific and professional experts* say about the design of it?
4. What information is available about the performance of similar processes?

The message of this standard is that every process improvement activity resulting in the redesign of a service or function should be preceded by a consultation of the published literature to review expert opinion as part of the redesign process.

PI.4.3 addresses the need to assess organizational performance and requires the hospital to compare performance data about its processes with information from up-to-date sources. This assessment should look at three levels of data from the hospital:

1. aggregate data (how it compares to itself over time),
2. knowledge-based data (how it compares with external sources of scientific and other up-to-date information), and
3. comparative data (how it compares to other hospitals).

The commission defines external sources as recent, scientific, clinical, and management literature and well-formulated practice guidelines or parameters. This definition is familiar to hospital librarians, because it is part of the definition of knowledge-based information from the "Management of Information" chapter.

The "Improving Organizational Performance" chapter is a critically important chapter for the hospital and the hospital library. It clearly supports access to knowledge-based information as an essential part of the improvement process. The library has a crucial role to play in meeting this standard by ensuring that knowledge-based information services and resources be readily available to all hospital groups working on improving organizational performance.

### LEADERSHIP (LD)

The "Leadership" chapter identifies the leaders within the organization and provides a framework within which they should operate. Librarians may be included in this group if they are department managers. However, leadership is not necessarily limited to department managers and hospital administrators. According to the JCAHO, leadership is what individuals provide collectively and personally in the hospital and can be carried out by any number of staff. As part of the hospital staff, the librarian should be involved in hospital-wide activities that may not immediately require the resources or services of the library. Nevertheless, the potential will always be there to promote knowledge-based services and resources.

LD.1.9.1 indicates that leaders are responsible for

implementing programs that promote job-related advancement and educational goals. Hospital librarians can assist organizational leaders in meeting this standard, by providing and promoting knowledge-based services and resources needed by staff who are studying for certification, advanced degrees, and other educational programs.

LD.2+ lists the important functions of a department manager. The library manager should be engaged in the types of activities that the JCAHO implies are essential for leadership. These responsibilities should be reflected in position descriptions. The list includes:

- integrating department services with the primary functions of the hospital,
- continuously assessing and improving the department's performance,
- developing policies and procedures,
- providing training and continuing education for all staff,
- recommending space and other resources, and
- participating in selecting outside resources needed for services.

LD.4.1 states that leaders should understand the approaches to and methods of performance improvement. Understanding of these issues comes through education, which can include a variety of settings and formats including reading the literature. As evidence of compliance, the JCAHO specifically lists information from literature references. Hospital librarians can help the hospital administration meet this standard by developing current awareness services that focus on updating and evaluating current information on performance improvement.

## MANAGEMENT OF HUMAN RESOURCES (HR)

The goal of this chapter is to identify and provide the right number of competent staff necessary to meet the needs of patients served by the hospital.

HR.4.2 addresses the issue of maintaining competence through regular and on-going education. The specific examples used to identify in-service and training include formal classes, meetings, audiovisuals, and journal articles. Librarians can expand their role as educators and provide support and coordination for a wide variety of in-service programs within the hospital.

## MANAGEMENT OF THE ENVIRONMENT OF CARE (EC); SURVEILLANCE, PREVENTION, AND CONTROL OF INFECTION (IC)

These two chapters are the last chapters that are applicable to health science libraries, as well as to all departments and professionals within the hospital. The commission requires that all employees take responsibility for maintaining a safe and healthy working environ-

ment. While there are no specific standards directly related to knowledge-based information, the library has an opportunity to keep appropriate staff aware of current trends, regulations, and other information in these fields.

## CONCLUSION

Hospital librarians have focused most of their attention on the "Management of Information" chapter, because it specifically addresses knowledge-based information. However, it is crucial that careful attention be given to the hospital-wide, functional orientation of the *Comprehensive Accreditation Manual for Hospitals*. There are other chapters that can provide interesting opportunities for the library to collaborate with departments and services who are also working towards meeting JCAHO standards. The hospital library's most important contribution to the accreditation process may be in applying knowledge-based information resources and services to all pertinent chapters in the *Comprehensive Accreditation Manual for Hospitals*.

## REFERENCES

1. JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS. Accreditation manual for hospitals. Chicago, IL: The Commission, 1988-92.
2. JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS. Comprehensive accreditation manual for hospitals. Oakbrook Terrace, IL: The Commission, 1994-1995.
3. JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS. Comprehensive accreditation manual for hospitals: the official handbook. Oakbrook Terrace, IL: The Commission, 1996-.
4. IBID.
5. IBID.
6. SILVERSTEIN JL. Strengthening the links between health sciences information users and providers. *Bull Med Libr Assoc* 1995 Oct;83(4):407-17.
7. CHMIEL K. Tips for your JCAHO survey. *National Network* 1995;20(1):22,24.
8. SCHARDT C. JCAHO & information management: complying with the standards, realizing the vision. *National Network* 1995;20(1):30-1.
9. BRADLEY J. Management of information management: analysis of the joint commission's standards for information management. *Top Health Inf Manage* 1995;16(2):51-63.
10. STANLEY EH. JCAHO's I.M. chapter: their standards, our compliance. Hints for preparing for a 1994 Joint Commission on Accreditation of Healthcare Organizations survey. *National Network* 1994;19(1):18.
11. DOYLE JD. Knowledge-based information management: implications for information services. *Med Ref Serv Q*. 1994 Summer;13(2):85-97.
12. JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS. Comprehensive accreditation manual for hospitals. op. cit., PF 1.

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